



STATE OF IOWA

CHESTER J. CULVER, GOVERNOR
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
EUGENE I. GESSOW, DIRECTOR

INFORMATIONAL LETTER NO. 772

December 29, 2008

TO: Iowa Medicaid Participating Providers (Excluding Individual CDAC)
FROM: Iowa Department of Human Services, Iowa Medicaid Enterprise
SUBJECT: Update on Timely Filing Requirements
EFFECTIVE: Immediately

The Iowa Medicaid Enterprise wishes to remind providers of the IME policy on timely filing requirements for resubmitting a claim for payment. Rules specify the following:

- Providers have 365 days from the date of service to submit a claim.
- A claim may be resubmitted or adjusted if it is submitted within 365 days from the last date of adjudication.
- No claim will be paid past 2 years from the date of service.

A copy of the Medicaid remittance advice is **no longer needed** to show an original claim submission. The IME will research to verify that the original claim was received within the original submission guidelines. The resubmitted claim must be received at the IME within 365 days of the Medicaid remittance advice date of denial. If the claim is submitted within that year and denies for a second time, providers have up to one year from the date of the last adjudication to make corrections, not exceeding the two years from the date of service. Providers may now resubmit claims electronically since remittance advices to prove the original filing dates are no longer required.

Claims should not be sent to the Department of Human Services. This will delay the processing of these claims. Resubmitted claims for services past 365 days from the last date of service should be sent to the regular IME claims address (listed on reverse) and will be processed according to the timeline described above.

Two exceptions exist to the 365-day timely filing guideline: retroactive eligibility and Third-party related delays. Each of these must be billed on paper with the proper attachment.

Claims addresses:

- **For regular claims, resubmissions and third party related delays** – note: Third-party related delays must be accompanied by a copy of the TPL explanation of benefits and must be received at the IME within 365 days of the TPL process date.

Medicaid Claims
PO Box 150001
Des Moines, IA 50315

- **For Exception to Policy claims (PAPER CLAIMS) and retroactive eligibility claims** – note: retroactive eligibility claims must be accompanied by the DHS Notice of Decision and must be received at the IME within 365 days of the notice date.

Iowa Medicaid-Exception Processing
1305 East Walnut Street, Room 112
Des Moines, IA 50319-0112

NOTE: Most Exception to Policy claims can now be filed electronically since the approval letter is in the electronic system and attachments can be filed electronically. Please refer to Informational Letter 757 for details.

Providers that wish to begin electronic filing can contact EDISS at www.edissweb.com or email support@edissweb.com. Electronic claims submission is a much cleaner and faster method to bill claims.

If you have any questions, please contact IME Provider Services, at 1-800-338-7909, or locally in Des Moines at 515-725-1004, or by e-mail at: imeproviderservices@dhs.state.ia.us.